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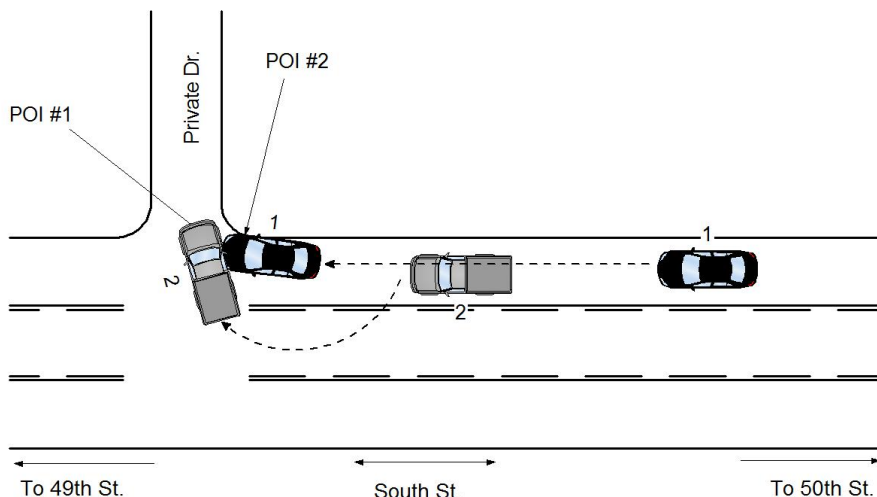
State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 057	Agency Case No. B5-086375	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1 02	DATE OF ACCIDENT	M M / D D / Y Y Y Y 09/17/2015		S M T W TH F S <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (In Military Time)		STATE USE ONLY
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	TIME OF ACCIDENT 1753	POLICE NOTIFIED 1756	Amended 09/17/2015
B 89	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. South St.		PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	ONE-WAY STREET? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE
C 1	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D 1	IF AT INTERSECTION			IF NOT AT INTERSECTION		
	NAME OF INTERSECTING ROADWAY			<input checked="" type="radio"/> FEET <input type="radio"/> MILES	N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING
				73.00	X	49th St.
V1/M 20	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
V2/M 20	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN	
E 1	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
VEHICLE NO. 1						
F 1	DRIVER LICENSE NO.	H12144377		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V1/N 1	DRIVER	JOHN M KINNAIRD		PHONE	402-570-8321	
V2/N 1	DRIVER ADDRESS	CITY, STATE, ZIP 1815 S COTNER BLVD, LINCOLN, NE 68506		DATE OF BIRTH (MM / DD / YYYY)	08/31/1976	
G 2	OWNER	JOHN M KINNAIRD		PHONE	402-570-8321	
	OWNER ADDRESS	CITY, STATE, ZIP 1815 S. Cotner Blvd., Lincoln, NE 68506		CITATION <input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO.	
H 4	LICENSE PLATE	PA NO.	SPA195	YEAR (Plate Expires)	2016	STATE (Of Plate) NE
V1/O 3	VEHICLE	YEAR	MAKE	MODEL	BODY STYLE	COLOR
	2005	Saturn	Ion	4 door Sedan	black	ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 3500
V2/O 2	VEHICLE ID NO. (VIN)	1G8AZ52F75Z153738		INSURANCE COMPANY	Farm Bureau	
	TOWED TO	TOWED BY		POLICY NO.	7445193	
	Capital Towing	Capital Towing				
VEHICLE NO. 2						
I 1	DRIVER LICENSE NO.	G02198041		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V1/P 1	DRIVER	BEN J JAMES		PHONE		
V2/P 1	DRIVER ADDRESS	CITY, STATE, ZIP 2800 WESTBROOK CIR, LINCOLN, NE 68522		DATE OF BIRTH (MM / DD / YYYY)	10/02/1946	
J 01	OWNER	BEN J JAMES		PHONE	402-476-8001	
	OWNER ADDRESS	CITY, STATE, ZIP 2800 Westbrook Cir., Lincoln, NE 68522		CITATION <input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO.	
V1/Q 1	LICENSE PLATE	TF NO.	023638	YEAR (Plate Expires)	2015	STATE (Of Plate) NE
V2/Q 4	VEHICLE	YEAR	MAKE	MODEL	BODY STYLE	COLOR
	2014	Chevrolet	Silverado	Pickup truck	silver / chrome	ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 5000
K 10	VEHICLE ID NO. (VIN)	1GCNKPEC3EZ215886		INSURANCE COMPANY	Farm Bureau	
	TOWED TO	TOWED BY		POLICY NO.	7302141	
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)				DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject
VEH. #	NAME	ADDRESS			3 Body Region	4 Injury Sev.
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	5 Trans.	SEX M F
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME		
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME		

INDICATE BY DIAGRAM WHAT HAPPENED

Indicate North by Arrow



Not To Scale

Vehicle #1 was WB on South St. approaching S. 49th St. behind vehicle #2 at approx. 35 mph. #1 reported that #2 pulled entirely into the center turn lane. #1 believed #2 was going to turn left and began to pass him when #2 turned right in front of #1 where they collided. #2 reported he was WB on South approaching S. 49th at approx. 10 mph. #2 wanted to pull into a private drive and reported he had to move slightly into the center turn lane so that he could swing the vehicle into the driveway. As #2 was making his turn #1 collided with him. Unable to determine who committed a traffic infraction.

PROPERTY	OBJECT DAMAGED				OWNER NAME	ADDRESS				PHONE	APPROX. COST OF DAMAGE \$					
	OBJECT DAMAGED				OWNER NAME	ADDRESS				PHONE	APPROX. COST OF DAMAGE \$					
WITNESSES	NAME										ADDRESS				PHONE	
	NAME										ADDRESS				PHONE	

VEHICLE MOVEMENT BEFORE COLLISION					POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS		VEH 1	1	VEH 2	2							
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME																								
1				X	South St.																								
2				X	South St.																								
1	01				06 Turning left				POINT OF IMPACT		08		POINT OF IMPACT		03														
2	05				08 Entering traffic lane				MOST DAMAGED AREA		08		MOST DAMAGED AREA		03														
01 Essentially straight ahead					09 Leaving traffic lane					00 None					02					03					04				
02 Backing					10 Parked					09 Top & windows					01					05									
03 Changing lanes					11 Slowing or stopped in traffic					10 Undercarriage					08					07					06				
04 Overtaking/Passing					12 Other					11 Total (all areas)																			
05 Turning right					13 Unknown					12 Other																			

OFFICER NO. 1591				TROOP/TEAM/BEAT CE				DEPARTMENT Lincoln Police Department												Photographs taken? <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
INVESTIGATOR NAME <i>(Print or Type)</i> Aaron Beasley								INVESTIGATOR SIGNATURE Approved by Aaron Beasley																DATE OF REPORT 09/17/2015			